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An Inaugural Dissertation

On Dysentery

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Preface.

Nothing but the imperious necessity of preparing an ~~dissertation~~ on some medical subject, previous to obtaining the degree of Doctor of Medicine, should have tempted my appearing before you in the character of an author; but in obedience to the rules of this institution of which I have the honor of being a member, I have thrown together a few hasty remarks on dysentery.

As this disease owing to its mortality & universal prevalence during the autumnal months, has claimed the attention of medical men from the earliest ages; it cannot be expected that one who professes himself a tyro in science and letters, should advance anything new or profound upon it; a brief and unvarnished essay, including a few observations made during a four years practice, and the usual attendance on medical Lectures is all that must be looked for.

History

Dysentery is a disease of warm weather than cold countries, and occurs especially in the latter summer or autumnal months, at the same time with intermitting or remitting bilious fevers. It is a disease claiming strict attention from military physicians, as Soldiers when exposed to rains during the autumnal months, or compelled to encamp or carry on their operations in low swampy districts, are extremely liable to be attacked by this scourge of armies; and often during campaigns in such situations more men perish from this one cause than by the sword.

Symptoms

It is a disease generally characterized by frequent mucus discharges, sometimes tinged with blood, at other times not; in the latter case constituting the dysenteria alba or morbus mucosus of Doctor Ro-

however. It is also attended with much griping and tenesmus, fruitless attempts at stool, in the indulgence of which little being voided, and that of an unnatural appearance. The excrementitious matter most commonly consists of mucus mixed or streaked with blood, and at times of thin serous matter or fragments of a membranous appearance, consisting of a coagulated lymph; these are sometimes mistaken for abrasions of the villous coat ~~of the villous coat~~ of the intestines. When natural excrements are discharged they generally are in the form of scybala, of a firm texture and round shape; corresponding with the cells of the colon in which they were formed, and in which they have probably lain since the commencement of the complaint. the formation of these however, I believe not to be a universal occurrence, as I have -

witnessed cases in which the patient recovered, where no such matters were visible in the alvine discharges. Dysentery is often ushered in by a diarrhoea, though at times, obstinate costiveness mark the approach of the disease several days previous to its commencement, attended with flatulence and considerable disorder of the stomach: but in whatever way it makes its first appearance, it soon puts on its characteristic symptoms. At times, in the commencement a pure and unmixed blood is voided in considerable quantity. An intimate combination of the blood with the faecal matter discharges, is a mark of its coming from a higher source than the larger intestines. The serum Sir J. Pringle observes is the cause of the irritation, and descends from the higher parts of the canal, whilst the mucus is secreted from the rectum & lower intestines.

streaks of blood denote the opening of small vessels at the extremity of the rectum. The stools in the commencement of the disease have a faint smell, but should mortification come on the fector is intolerable. Dysentery is generally complicated with fevers, and those put on various types, being intermittent, remittent, and sometimes of a typhus character; the latter appeared to be the concomitant fever the preceding autumn, and to this we must impute the many fatal cases of dysentery. The Terminations of this disease are various; It sometimes ceases gradually, after proper treatment, the stools becoming natural, and the griping with the tenesmus entirely ceasing: In other cases, the disease after continuing a considerable length of time, ends in a diarrhoea, accompanied with hectic symptoms. The extremity of the alimentary canal is generally the last part that recovers. This com-

This complaint at times terminates in a severe attack of rheumatism, being as it were thrown upon the extremities: I have witnessed several cases, and owing perhaps to this, some writers have gone so far as to consider Dysentery altogether a rheumatic affection of the bowels.

Our Prognosis in this disease should be extremely guarded, as apparently desperate cases at times recover. We may consider the patient in danger when the first purge and physic does not relieve him; the symptoms with the hectic fever continuing to increase, the pulse fluttering and intermittent, the countenance much changed, the patient restless without complaining of gripes: also, cases attended with little or no discharge from the bowels, here inflammation probably transcends the secretory point; they appear to be of the nature of cholic, the pain

being similar, and generally terminate fatally. In the low and advanced stages, hiccup if obstinate, denotes mortification: the blood intimately mixed with the fæces is a mark of danger; sore throat, or aphthae, involuntary stools &c. mark the approach of death. Causes are crude indigestible matters received into the stomach: the ordinary causes of continual or intermittent fevers; sensible qualities of the atmosphere, as sudden transition from heat to cold, or from dryness to moisture. It alternates with rheumatism & appears to be of a catarrhal or rheumatic nature. It may be considered a disease generally originating from marsh effluvia, and peculiarities in the atmosphere; we must infer from this its primary seat to be the stomach, finally extending itself to the larger intestines. The actual condition of the parts, produced by the above causes, and upon which most

of the symptoms depend, appears to be an inflam~~matory~~ed state of the mucous membrane lining the primæ viæ, especially of the lower intestines; together with this, and probably in great part caused by it, there is a preternatural constriction of their muscular fibres. Those two circumstances are sufficient to explain many of the symptoms; the retention of the natural fæces in the colon will account for the nonappearance of natural evacuations, and the inflamed state of the lining membrane, is the cause of the copious effusion of mucus. We accordingly find on dissection, where there is not too much disorganization from gangrene, constrictions of the colon, and the consequences of violent inflammation may be detected; such as thickening of the coats of the intestines, ulcerations in the colon and rectum, though the latter is by no means a necessary consequence of dysentery. Also a pustulear appearance of the

colon and rectum resembling small pox, being caused by gangrene, which sometimes extends their whole length. The small intestines are seldom found in a diseased state but are considerably inflated.

Diagnosis. Dysentery resembles diarrhoea in some respects, but may be distinguished from it, by the tenesmus or painful efforts at stool, in the absence or natural feculent matter in the evacuations, and the small quantity evacuated, though the attendant pain often attends diarrhoea especially of advanced life. also by the discharge of blood with the stool which does not occur in diarrhoea: the fever attending dysentery serves as a distinguishing mark: the two diseases often run into each other; Diarrhoea is not a contagious disease, whereas dysentery when attended with typhus fever is so. From the Colic it is discriminated by the constipation

and acuteness of pain attending the latter disease, and also in the presence of tenesmus.

Treatment. Dysentery may be considered a disease in which the efforts of nature towards effecting a cure are for the most part abortive: but if the views we have taken of the disease be correct; that is, we consider it an inflammatory affection of the lower bowels, especially of their interior coats, accompanied with stricture of the colon; which is to be considered in great part an effect of that inflammation; the indications of cure are sufficiently obvious, our first object should be to remove the inflammation together with the morbid irritation and spasm attending it; for effecting this purpose venesection is demanded, and in strong habits, where inflammatory symptoms run high, blood in considerable quantity should be drawn; the operation

being repeated as often as the state of the system should demand it; but during some seasons when the system appears disposed to fall into a typhus condition, caution in the use of bloodletting becomes necessary; not generally in our climate it is called for, as a prelude to the rest of the treatment. And in the words of a worthy professor, it excels all other means in ~~relieving~~ awaking susceptibility to medical impression; it certainly has a powerful effect in relieving the constriction existing at this time. We next, in cases attended with morbid irritation, nausea and attempts to vomit, with accumulations of bile, resort to the use of an emetic; and this is particularly necessary with the Dysentery arising in miasmatic districts. The antimony appears to be the most appropriate rule in such cases:

when [illegible] [illegible] [illegible] [illegible]; the [illegible]
may be [illegible] that the [illegible] [illegible]
attained in a second case of [illegible] [illegible]
[illegible] the purging may be continued in
producing a [illegible] evacuation of the
intestinal canal, the morbid secretions to-
gether with the [illegible] matters adhering to the
bowels [illegible] [illegible] [illegible] [illegible] even
all the symptoms the [illegible] to be pal-
liated is the removal of them with as little
irritation to the inflamed surface of the
intestine as possible: for this purpose we
resort to the milder cathartics, and to suc-
ceed the emetic nothing is preferable to
the castor oil [illegible] or glauber salts with
tartar emetic [illegible] in solution will be
found extremely serviceable this causes a
copious evacuation. At times the bowels
will not be acted upon by the above ar-
ticles here we resort to a strong [illegible]

of tincture of [illegible] in solution, or a [illegible] preparation composed of Bu-[illegible], mucilage of gum acacia & [illegible] of the latter, as [illegible] has been highly recommended by Dr. [illegible] Wells. In bilious cases and those occurring in miasmatic districts, after a bilious cholera, mercurial purges will be found much the best; large and repeated doses of calomel, at times combined with opium, will be found much the best, and as we the people have many other home fine, we have a valuable property of calomel when applied to inflammatory surfaces as it would be here; it does not increase the inflammation, nor excite irritation. It may also be given in combination with rhubarb.

The inflammation with the above treatment, [illegible] injections will be found necessary, such as a tea of flaxseed tea, with 100 gtts.

[illegible]

oil combined with the spts turpentine will be the best; the latter appears to increase its medicative operation, in the relaxing effects which result from the use of this article in gastritis, and other affections of the alimentary canal about to terminate in gangrene, may be expected good. its use may be very especially when attended with much tension and distension of the abdomen: we should also wring cloths out of it and apply them to the patients belly. the most other complaints, particularly of the native of warm climates, this disease is accompanied with a stricture of the extreme vessels, and a consequent suppression of perspiration; and though a weakening may take place from the natural effects of the system, it appears to be of a moderate kind, in lieu of relieve the symptoms; it therefore becomes ~~necessary~~ an indication of necessity, in order to restore the function

to its natural and healthy state, and for this purpose we shall find few remedies to compare with the antimoniated tartrate of potash, given in small doses often repeated it will have the effect of restoring the healthy action of the skin, and also excoriating the alimentary canal. We may also employ Ipecacuanha in combination with calomel and opium, this will be found superior to Dover's powders. Calomel in small doses is found to be very beneficial in bowel complaints, and the Ipecac. is known to be serviceable where there is much tenesmus. In conjunction with the above remedies, where there is tension of the abdomen we may employ fomentations, also the warm bath will be found of importance, this is to be borne in mind. Bleeding are indispensible in this stage of the complaint, some prefer the opt. nitrates in order to avoid

the inconvenience they occasion when applied to the abdomen; but I certainly should consult the safety of the patient in preference to his present feelings, and apply them to the belly; a large one to cover the lower part of the abdomen is best, it will subdue inflammation, and lessen the constriction and irritability of the rectum. But in some cases of this obstinate complaint, notwithstanding the use of all the above remedies during the early and acute stages, it continues unbroken; the fever assumes a more of the hectic form, with sore mouth, the throat and tongue covered with aphthæ, the pulse feeble and small, the strength sunk and the body more or less emaciated; and in addition to this perhaps great anxiety and prostration, with offensive diffusivity of the breath, the stools small and frequent, passing of purulent or sanious

matter is thin with mucous & bloody with abdominal pain and tenesmus very distressing. This we may indeed consider a discouraging state of things, but still there are hopes, nay if the expression be allowable we must combat death a while longer. In this advanced stage of the disease, the evacuation of the offending matter from the bowels is still the leading object of medicine; and for this purpose the mildest means must be employed; we must have recourse to bland mucilaginous drinks to endeavour to diminish the acrimony of the matter lodged within the intestines, and procure respite from pain, rather than to suppress by anodynes. For fulfilling the first we may employ the castor oil with the opts. in opening, any of the mucilaginous combine with the tinctures of Rhubarb; we may also employ the gum arabic, or some of the mucilaginous substances, holding the mucous matter

in solution, and given in conjunction with O-
-pi tet, we will succeed to this stage of the
complaint; should the vomiting and uneasiness
we desiring, the following mixture com-
-posed as follows will be found effectual.

℞ Cas. Oil. 1. ℥.
Gum arab. ℥j. ℥j.
Laudanum 1. ℥j.
Laud. 60 gtts.
aqua. Mentha ℥j. ℥j. Dose
℥ss. every two or three hours: this is highly
recommended by our present Professor - the
vomiting I have found much benefit to
result from its use: we may also employ
the cathartics jalap and in conjunction
with the above mild injections, such as a dec-
-coction of the mucus or gut mutton broth in
the quantity of 6 or 8 ounces if it can be
obtained; but the best of all for the purpose
of allaying the vomiting and tenesmus is-

an injection composed of fresh butter milk,
this should be free from curds or coagulity, and
administered in the quantity of half a pint
or three gills: when there is much pain
or tenesmus, and especially where the
clysters cannot be retained any length
of time, it becomes useful to combine
laudanum with the, or push a pill or
two of opium up the rectum: the intestine
will make no effort to expel it, and the
benefit will generally be great, and
evacuation of the tenesmus. The diet should
be light, consisting of fish or rice
sago, arrow root, light puddings and pa-
nada. Animal food of all kinds, except fresh
mutton broth is not allowable; a milk die-
t is to be recommended. For drink in
this stage of the complaint we may em-
ploy rice or barley water, a decoction of
starch with gum arabic, weak linseed tea

the above drinks may be seasoned with cinnamon water or sugar. M. Serrac, Physician to the French Army was in the habit of giving in the advanced stages, one grain of Antimony dissolved in a pint of whey or chicken water every day in divided doses, and this answered for drink and medicine until the patient recovered. This quantity of antimony I should consider too small. In many cases the Dysentery assumes a chronic form, and the patient is kept low by the irritation of a tenesmus, or by frequent returns of diarrhoea; there may also be some hepatic affection, here salivation may be resorted to; Calomel may be given in small doses, together with fractions of mercurial ointment: the blister on the abdomen should be kept discharging, and a flannel roller applied round the belly of the patient; flannel should be worn next

the skin; we may have give a grain or two of Ipecacuanha combined with opium several times a day with marked advantage, also the decoction of logwood; to this we may add the infusion of colombo; and in case the patient is strong enough gentle exercise as riding on horseback. If the food be carried off imperfectly digested, constituting a lientery, which is owing to an enfeebled state of the bowels, the astringent vegetable substances, such as catechu, logwood, the Dwa berry root &c. with opiates are to be administered. Pringle observes, in those cases he has often known a cure to be effected where astringents have been of no avail by a milk diet without them. To prevent a relapse the patient should be warm clothed with flannel next the skin, use gentle exercise in the open air; observe regular hours in eating and sleeping, and use

every other means for restoring the healthy functions of the body.

I must now close this brief and imperfect essay ~~perhaps~~ rendered poorly by the little interesting matter which it contains but previous to concluding I must express my warmest thanks in return for the instruction and knowledge I have gained from attendance on your highly interesting lectures and that you may individually contribute by your useful labors to uphold the reputation of the first medical school in the new world is the sincere wish of one who is now constrained to claim a share of that indulgence and liberality by which you have been heretofore characterized.

Finis